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## FACSIMILE TRANSMITTAL COVER SHEET

DATE: April 12, 2005 ATTORNEY DOCKET NUMBER: KCC 4775  
PTO FACSIMILE NUMBER: (703) 872-9306PLEASE DELIVER THIS FACSIMILE TO: Examiner Michele M. Kidwell  
THIS FACSIMILE IS BEING SENT BY: Christopher M. Goff  
NUMBER OF PAGES: 3 INCLUDING COVER SHEETTIME SENT: 2:34pm OPERATOR'S NAME Daphne H. Moore

## CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to  
the Patent and Trademark Office on the date shown below.Daphne H. Moore  
Typed or printed name of person signing certification  
Daphne H. Moore April 12, 2005  
Signature DateType of paper transmitted: Notice of AppealApplicant's Name: Kimberly-Clark Worldwide, Inc.Serial No. (Control No.): 09/998,500 Examiner: KidwellFiling Date: November 30, 2001 Art Unit: 3761Application Title: BREAST PAD ASSEMBLY CONTAINING A SKIN  
BENEFIT INGREDIENTIF YOU DO NOT RECEIVE ALL PAGES CLEARLY, CALL BACK AS SOON AS  
POSSIBLE. CONFIRMING NUMBER IS (314) 231-5400.

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KCC 4775 (K-C 17,129)  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Beth Anne Lange  
Serial No. 09/998,500  
Filed November 30, 2001  
Confirmation No. 6529  
For BREAST PAD ASSEMBLY CONTAINING A SKIN BENEFIT INGREDIENT  
Examiner Michele M. Kidwell

Art Unit 3761

April 12, 2005

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER  
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES**

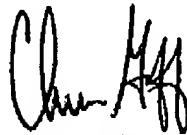
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VIRGINIA 22313-1450

SIR:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner dated January 26, 2005, rejecting the following claims: 1-71.

The Commissioner is hereby authorized to charge Deposit Account No. 19-1345 the appeal fee of \$500.00. If there are any additional charges in this matter, please also charge Deposit Account No. 19-1345.

Respectfully Submitted,



Christopher M. Goff, Reg. No. 41,785  
Senniger Powers  
One Metropolitan Square, 16th Floor  
St. Louis, Missouri 63102  
314-231-5400

CMG/JMB/dhm

FEE TRANSMITTAL

Application Number 09/998,500  
Filing Date November 30, 2001  
Confirmation No. 6529  
Inventor(s) Beth Anne Lange  
Group Art Unit 3761  
Examiner Name Kidwell  
Attorney Docket Number KCC 4775 (K-C No. 17,129)

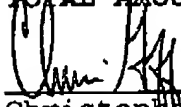
METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345.  
☒ The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17 to Deposit Account No. 19-1345.  
☐ Applicant claims small entity status.
2. ☐ Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. ☐ BASIC FILING FEE Subtotal (1) \$ \_\_\_\_\_  
(Type: \_\_\_\_\_)
2. ☐ EXTRA CLAIM FEES Subtotal (2) \$ \_\_\_\_\_  
Total Claims \_\_\_\_\_  
Independent Claims \_\_\_\_\_  
Multiple Dependent Claims \_\_\_\_\_
3. ☒ ADDITIONAL FEES Subtotal (3) \$ 500.00  
☐ Surcharge - late filing fee or oath  
☐ Surcharge - late provisional filing fee or cover sheet  
☐ Extension for reply within \_\_\_\_\_ month  
☒ Notice of Appeal  
☐ Filing a Brief in Support of an appeal  
☐ Request for ex parte Reexamination  
☐ Petitions to the Commissioner  
☐ Submission of Information Disclosure Statement  
☐ Recording each patent assignment per property  
☐ Request for Continued Examination  
☐ Other: \_\_\_\_\_

TOTAL AMOUNT OF PAYMENT \$ 500.00

  
Christopher M. Goff, Reg. No. 41,785

  
date

CMG/LJH/cms